



The Alberta Gaming, Liquor and Cannabis Commission (AGLC) will only approve a licence or registration after a thorough investigation. Full disclosure is required.

The granting of a licence, registration or a finding of suitability is a privilege not a right. The burden of proving eligibility is at all times your responsibility.

The applicant for a licence or registration is responsible to pay all costs associated with the due diligence investigation pursuant to Section 28 of the Gaming, Liquor and Cannabis Regulation (GLCR).

Read the Instructions carefully – they contain important information that is required for the completion of the disclosure package.

To maintain confidentiality, submit all disclosures in a sealed envelope marked and addressed as follows:

Personal & Confidential – TO BE OPENED BY ADDRESSEE ONLY Attention: Senior Manager, Due Diligence Alberta Gaming, Liquor and Cannabis Commission Audit Services Branch 50 Corriveau Avenue St. Albert AB T8N 3T5 Canada

For further information contact the Due Diligence Unit at <u>DueDiligence@aglc.ca.</u>

INSTRUCTIONS

A. TERMS / DEFINITIONS

- 1. AGLC Alberta Gaming, Liquor and Cannabis Commission.
- 2. Applicant Individual, corporation or other entity applying for a licence, registration or approval.
- **3.** Associated Applicant Individual, corporation or other entity that is or will be a(n)
 - i. Owner,
 - ii. Partner (in a partnership),
 - iii. Promoter,
 - iv. Shareholder directly or indirectly controlling 5% or more of the shares in the Applicant, or
 - v. Any individual or entity with a direct or indirect financial interest of 5% or more in the **Applicant**.
- **4. Bingo Facility Licence** A licence issued by the AGLC authorizing the operation of a class B bingo facility.
- **5. Casino Facility Licence** A licence issued by the AGLC that authorizes the operation of a casino facility.
- 6. Control
 - i. Power to direct.
 - ii. Any direct or indirect influence which, if exercised, would result in control in fact of the corporation whether directly through the ownership structure, or indirectly through a trust, a contract, ownership of shares, stocks, equities or securities of another corporation or other entity.
 - iii. The ability to appoint, elect or cause the appointment or election of a director, whether or not that ability is exercised.
 - iv. Any owner, shareholder, other individual, or corporate entity related to an associated applicant that has direct or indirect control of 5% or more of the applicant.
- 7. Controlling Interest the holding by an individual, group or corporate entity a majority of a business, giving the holder a means of exercising control.
- 8. Director
 - i. Those individuals acting collectively to whom the duty of managing the general affairs of the company is delegated by the shareholders. Their

Personal Applicant Disclosure – Licence/Registration Application **PROTECTED B WHEN COMPLETED** duty is to conduct the business of the company for the greatest benefit of the shareholders.

- **ii.** Any individual acting in a capacity similar to that of director of a company.
- **iii.** A trustee, officer, member of an executive committee and any individual occupying a similar position.
- 9. Financial Interest Includes any direct, indirect or contingent interest
 - i. Whether as owner, partial or otherwise, of an interest, beneficial owner, owner of shares or owner through trusteeship, investment or otherwise, or
 - In management, whether by management agreement, partnership agreement or other agreement, or
 - iii. Because of having loaned or advanced or caused to be loaned or advanced money or anything of value, with or without security, or
 - iv. Any individual or corporate entity related to an applicant or associated applicant that holds a direct or indirect financial interest of 5% or more in the applicant.
- 10. Gaming Includes all types of gaming/gambling e.g., bingo, casino, raffle or lottery, video lottery terminal, slot machine, junket operation, horse racing, dog racing, pari-mutuel operation, sports betting, internet gaming, and the distribution or manufacture of any type of gaming supply.
- **11.** Gaming Entertainment Centre (GEC) is a gaming facility with between 15 and 30 VLTs.
- 12. Gaming Supplier Any individual, corporation or other entity that makes, sells, advertises or distributes gaming supplies either directly or indirectly to any licensed gaming facility and/or charity in Alberta.
- **13.** Gaming Supplies Supplies, equipment and devices designed to be used in a gaming activity, does not include normal office supplies.

14. Gaming Worker –

i. Means an individual who is paid to assist a gaming licensee in the conduct or management of a gaming activity, or an individual who is paid to

assist a facility licensee in the operation of a licensed facility.

- **ii.** A gaming worker may be required to be registered with the AGLC.
- **iii.** If the gaming worker is paid for their services through a corporate entity, this entity must be registered as a gaming worker supplier.

15. Gaming Worker Supplier -

- i. Any individual, corporation or other entity that is paid directly or indirectly to provide gaming workers to assist a gaming licensee in the conduct or management of a gaming activity or in the operation of a licensed facility.
- ii. If a gaming worker is paid for their services through a separate corporate entity, this entity must be registered as a gaming worker supplier. Contact the AGLC for application forms.

16. Key Employee -

- i. Individual(s) that exercise influence or control over the day to day operations or decision-making of a registrant or licensee.
- ii. Individuals employed in senior management positions such as CEO, CFO, controller, senior compliance officers, or any other individual who performs functions for a company similar to those normally performed by an individual occupying any of these offices.
- **iii.** Any other individual holding a key position as determined by the AGLC.
- 17. Licence and/or registration a licence or registration issued under the Gaming and Liquor Act (Alberta) and, includes an agreement, permit, certificate, finding of suitability, qualification or other authorization issued under the laws of a jurisdiction other than Alberta that, in the AGLC's opinion, is similar to a licence/ registration issued under the Gaming and Liquor Act (Alberta).

18. Officer -

- i. An individual employed in connection with the administration and management of a department.
- ii. The chairman and vice-chairman of the board of directors, the president, vice-president, secretary, assistant secretary, treasurer, assistant treasurer, general manager and any other individual designated an officer by by-law or resolution of the directors, and any other individual who performs functions for a company similar to those

normally performed by an individual occupying any of those offices.

- iii. The chairman, president, vice-president, secretary, treasurer, comptroller, general counsel, general manager, director, managing director or any other individual who performs functions for a corporation similar to those normally performed by an individual occupying any such office.
- **19. Partner** A reference to a partner of an individual includes a spouse, common-law spouse or individual connected to the applicant by virtue of an adult interdependent relationship.
- **20. Promoter** Any individual, corporation or other entity who
 - Acting alone or in concert with one or more other individuals or corporate entities, directly or indirectly takes the initiative in founding, organizing or substantially reorganizing a business; or
 - ii. In connection with the founding, organization or substantial reorganization of the business, directly or indirectly receives, in consideration of services or property or both, 5% or more of a class of shares or 5% or more of the proceeds from the sale of a class of shares.

21. Racing Entertainment Centre (REC) -

- i. Facility that is located in a grandstand adjoining a race track, and
- **ii.** In which a provincial lottery may be conducted.

22. Registered Gaming Worker -

- i. Means an individual registered with the AGLC and who assists a facility licensee in the operation of a licensed facility.
- **ii.** No individual may act as a gaming worker unless registered by the AGLC.
- **iii.** If the registered gaming worker is paid for their services through a corporate entity, this entity must be registered as a gaming worker supplier.

B. COMPLETING THE DISCLOSURE

- Individuals are only required to complete one disclosure form, even though they may be related to both the applicant and an associated applicant(s).
- **2.** The AGLC may request disclosure from other individuals and entities associated with the applicant.

- **3.** Each individual must complete forms Personal Disclosure-5561PI and Personal Disclosure-5561CW. In additional to these forms the following positions must also complete additional forms:
 - Registered gaming workers occupying a designated key employee position – form Special Requirements-5561RGW
 - Cashier's Cage Advisors / Count Room Advisors / Dual Advisors – form Special Requirements-5561A
 - iii. Raffle Ticket Managers Special Requirements-5561RTM.
- **4.** An answer must be provided for every question do not leave blank spaces
 - i. If a question does not apply, write "Does not Apply" or "N/A".
 - ii. If there is nothing to disclose, write "None".
 - **iii.** Answers such as *see previous disclosure* or *no changes since last disclosure* are **NOT** acceptable when questions ask for current information.
- 5. All disclosures must be typed or printed clearly. Illegible disclosures will be returned.
- **6.** The disclosure may not be modified in any way. Modified disclosures will be returned.
- **7.** If additional space is required, either make additional copies of the page, or use additional paper and attach it to the appropriate page.
- All attachments must be clearly labelled as "Attachment 1, Attachment 2, Attachment 3," etc. The attachment number must then be noted in the space provided beside the applicable question.
- **9.** All attachments must be an accurate copy of the original and be signed by you.
- 10. The disclosure must be signed/initialled as follows
 - Initial and date each page to verify all statements made are accurate, all material facts are included, and all requested information and documents are provided.
 - **ii.** Sign the consent to criminal and financial checks your partner must also sign.
 - iii. Sign the Statutory Declaration. The Declaration must be witnessed by an individual authorized to take declarations.
 - iv. Sign the Consent Waiver.

- **11.** Keep a copy of this disclosure for your records. You may be contacted for further information, documents or clarification.
- **12.** Incomplete disclosures will be returned to the appropriate individual for completion.

C. IMPORTANT INFORMATION

- **1.** All information and documents provided as part of this disclosure
 - i. Become the property of the AGLC and will not be returned.
 - **ii.** Are confidential and will be treated as such.
 - **iii.** Are for the AGLC's use to determine the applicant's eligibility for a licence, registration or approval.
 - Will be verified through an investigative process further information, documents or clarification may be requested.

D. PROTECTION OF INFORMATION

- 1. The information collected in this disclosure is only used in determining the eligibility of the applicant for a licence, registration or approval and will not be shared with other AGLC units without consent.
- 2. The Special Requirements Pages for Registered Gaming Workers will be forwarded to AGLC Licensing Registrations for processing.
- **3.** The authority for the collection of this information is the *Gaming, Liquor and Cannabis Act* (Alberta) and the *Gaming, Liquor and Cannabis Regulation* (Alberta) and FOIP Sections 33(a) & (c).
- **4.** All application packages shall be kept confidential and shall only be released in accordance with the
 - i. Consent Waiver.
 - **ii.** Freedom of Information and Protection of Privacy Act (FOIP Act) (Alberta).
- Disclosure documents are classified "Restricted" and are handled as such. Details of these processes can be found <u>here</u>.

PERSONAL INFORMATION

1. Personal Information:

La	st	First	Middle	
Date of Birth ((YYY/MM/DD)	Р	lace of Birth	
Gender		Attach a Copy of your Birt	h Certificate	
	Previously prov	ided or Attachment:		
Maiden Name	List all aliase	s and name changes including nicknames and the date changed		
Citize	nship	Social Insurance Number (Optional)		
Eye Colour	Hair Colour	Height	Weight	

2. Addresses:

Home Address						
						🗌 Rent
						🗌 Own
City	Province	e/State		Postal/Zip Code	Country	
Home Telephone Number		Work Tel	ephone Ni	umber	Cell Phone	Number
E-mail Addresses (Work and Person	al)					
Mailing Address – if different from a	bove		Same as	home address		
City	Province	e/State		Postal/Zip Code	Country	

3. Whereas you will be involved in a sensitive position of trust, criminal and financial checks will be conducted on you and your partner.

Consent to criminal and financial checks by signing below.

Your Signature

Spouse/Partner's Signature

4. This disclosure is being completed on behalf of the **following Applicant(s) and/or Associate Applicant(s)** (entity/corporation):

5.	Is this the first time you have completed a disclosure for the AGLC? 🗌 No 🗌 Yes
6.	AGLC Registered Gaming Worker Number (if applicable):
7.	Attach a passport photograph:

- i. You must sign the back.ATTACH PHOTO HEREii. Date that the photo was taken.MUST BE ATTACHED FOR(must be within the last three months):EASY REMOVAL
- 8. List all residences for the past ten years.

C	Date	Primary Residence	Location of Property
From (MO/YR)	To (MO/YR)	(Yes/No)	(Street, City, Province/State, Country, Postal Code/Zip Code)

9. Sign below to authorize the AGLC to discuss this disclosure with an individual other than yourself.

You **ONLY**, or

Individual's Name				
Mailing Address	City	Province/State	Postal/Zip Code	
Home Telephone Number	Work Telephone Number	E-mail Address	es (Work and Personal)	

I AUTHORIZE THE AGLC to contact and discuss any aspects of this disclosure with the individual named above.

SIGNED BY (YOU):

10. Beginning with high school, provide the information listed below with respect to each school, college, university, trade school, graduate or post graduate school you have attended.

From (MO/YR)	To (MO/YR)	Name And Address Of School, Training Program, Etc.	Description of Education Program	List Any Degree Or Certification Attained and Year	Graduated Yes or No

11. Have you or your partner ever made application for or held any professional or occupational licence or designations - i.e. doctor, nurse, lawyer, designated accountant, etc.?

From (MO/YR)	To (MO/YR)	Name on Licence	Type of Licence	Name and Address of Licensing Agency/Organization	Disposition of Application

EMPLOYMENT / WORK HISTORY

12. Current Employer Information:

Current Employer		(Occupation/Title	Since Date		Salary
Address	City		Province/State	Postal/Zip Code		Country

13. List your employment history for the past ten years, including all periods of unemployment.

From (MO/YR)	To (MO/YR)	Position	Name of Employer	Reason For Leaving

14. Have you ever served in a military organization of any country or have you been an active or inactive member of a reserve force of any country?

No 🗌] Yes, Check	(🖂)	one
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If yes provide the following information:

Branch of Service	Highest Rank Held	Service Number
ctive Service	Type of Relea	se/Discharge

15. Have you ever served as a member of a law enforcement agency (include municipal, provincial, federal)?

🗌 No	Yes, Check	(🖂) one
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If yes provide the following information:

Agency Name	Highest F	ank Held	Regimental/Badge Number
Periods of Service			Type of Release/Discharge

16. In regard to the above military and/or police service, have you ever had charges filed against you, been tried by military court martial or been subject to an internal investigation?

No Yes, Check (X) one

If yes provide the following information:

Nature of Charge or Arrest	Date and Location of Charge or Arrest	Name of Organization Filing Charges	Disposition (convicted, acquitted, dismissed, etc.)	Sentence

	FAMILY INFORMATION								
17. la	7. I am currently: Married Engaged Divorced Separated Widowed Single Common Law Cohabitating								
18. If	18. If married, common-law or cohabitating, the following questions must be completed regarding your partner.								
	Last Name First Middle Gender								
		I		ļ					
	Date of Birth (YYYY/MM/DD)		P	lace of Birth		Social Insura	ance Number (Optional)		
L	List all aliases a	nd name ci	hanges, legal or otherwise	e, include nickna	mes and maiden n	ame and the date changed			
	Date of Marriage/Cohabitat	ion/Commo	on-Law		Place of Marriage				

19. Partner's Address:

_	Same as me				
	Home Address				Home Telephone Number
	City	Province/State	Postal/Zip	Code	Country

20. List all compensated employment, held by your partner during the last two year period, beginning with their current employer.

From: (MO/YR)	To: (MO/YR)	Name and Address of Employer	Title/Position Held

21. List **all** your children, step-children and adopted children (dependent or not), and any other dependent individual(s).

Name	Birth Date	Relationship	Amount of Support Received	Dependant (Y/N)

22. List the name, city of residence and most recent occupations of your parents and parents-in-law.

	Name	City	Occupation
Father			
Mother			
Father in Law			
Mother in Law			

23. List all relatives currently engaged in or employed by the gaming industry. Include children and your partner.

Name of Relative	Relationship	Position in Gaming Industry	Name of Employer

24. List all your previous marriages/relationships. Do not include current partner.

Name of Former Partner(s) (include maiden name if applicable)	Birth Date	Date and Place of Marriage	If Annulled, Separated or Divorced, Provide Date and Jurisdiction

25. Your current dependent/(ex-) partner support obligations:

I am not subject to a court order or other agreement for the support of a child/dependent or (ex-) partner.

I am subject to a court order or other agreement for the support of a child/dependent or (ex-) partner, and am in compliance with the order/agreement.

I am subject to a court order or other agreement for the support of a child/dependent or (ex-) partner, and am NOT in compliance with the order.

Public agency/court responsible for enforcing support order/agreement:

Agency Name & Contact Person	Telephone Number	File Number

BUSINESS INTERESTS

When answering the following questions, indicate with an asterisk (*) before each item/line, answers that pertain to your partner or dependent.

26. List all corporations/entities that you or your partner have a financial, ownership, organizational or shareholder interest in. Do not include publicly traded corporations in which you own less than 5% of stock. List all corporations owned during the past ten years.

(*)	Da ⁻ From (MO/YR)	tes To (MO/YR)	Name and Location of Corporation/Entity	% Interest Held	Current Status of Business	Name & Address of Other Owners (other than a publicly traded company)
		_ , , ,				

27. List all corporations/entities that you or your partner are/were associated with as an officer, director or other similar capacity. Include non-profit societies, charitable entities and family trusts. List all associations for the past ten years.

(*)	Dates			Compensation	
(*)	From (MO/YR)	To (MO/YR)	Position Held and/or Nature of Interest	Received	Name and Address of Corporation/Entity

28. I am/will be associated with the corporate applicant and/or corporate associated applicants as one of the following – include all positions currently held or proposed:

Position	For Corporate Applicant Position held and since date	For Corporate Associated Applicant Position held and since date
Owner/Investor		
Director/Officer		
Employee		

CRIMINAL / LITIGATION / DISCIPLINARY INFORMATION

IMPORTANT INFORMATION:

Failure to provide full disclosure will be taken into account in assessing your character, honesty and integrity and may result in you being found unsuitable.

- **A.** You may be found unsuitable if your character, financial history or competence poses a threat to the integrity of gaming.
- **B.** Enquiries will be made to determine if you or your partner have ever been charged with or convicted of, or is subject to pending charges for a criminal, regulatory, civil or other statutory offence.
- C. You, the applicant and all associated applicants must provide full disclosure of all criminal and civil proceedings on the appropriate disclosures.
- D. Failure to disclose any such involvement will be taken into account when assessing the applicant's eligibility for a licence or registration.
- **E.** The particulars of any offence or claim and the sentence or penalty imposed will be reviewed to determine whether a conviction or charge affects the applicant's eligibility for licence or registration.

Definitions:

Charge – Includes any indictment, information, summons or other notice of the alleged commission of a criminal offence.

Arrest – Includes any detaining, holding or taking into custody by any law enforcement authority to answer for the alleged performance of any offence.

Offence – Includes all offences, regardless of the seriousness, under any Federal, Provincial or Municipal statute, or violations of probation or any other court order.

INSTRUCTIONS

- 1. Provide all required information even if
 - i. The charges were dismissed or subsequently downgraded to a lesser charge.
 - ii. You completed an alternative measures or other similar program.
 - iii. You were not convicted.
 - iv. You did not serve any time in prison or gaol.
 - iv. The investigation, charges or offences happened in another jurisdiction.
- 2. Do not provide information in questions 30 and/or 31 if you were charged under the provisions of the Youth Criminal Justice Act (Canada) or other similar legislation.

- 30. List all instances where you or your partner have **<u>ever</u>** been: investigated, charged, arrested, or convicted of any offence (except minor traffic violations), regulation or code.

(*)	Date	Reason for Investigation, Arrest, Charge and/or Conviction	Disposition and Sentence	Enforcement Agency Name and Location

31. List all instances where you or your partner have ever been investigated, disciplined, fined or sanctioned by any regulatory body (i.e. gaming, liquor, securities, professional, etc.).

(*)	Type of Licence/Registration	Name of Regulatory Body, Contact Name and Telephone Number	Date and Reason(s) for Denial, Suspension, Revocation or Condition

	32. List all instances where	ou or your partnei	r have been a defendant or	plaintiff in any c	civil action or lawsuit in the last ten yea	ars?
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(*)	Date	Reason for Action or Lawsuit	Disposition and/or Judgment	Court Type and Location

- 33. If you answer yes to any of the following, include a narrative explaining your answer (include as an attachment):
 - i. Have you or your partner ever been barred or otherwise excluded for any reason from any form or type of gaming facility?
 - ii. Have you or your partner ever been employed by or associated with an individual, entity or corporation connected in any way with an illegal gaming enterprise or activity?
 - No Yes
 - iii. Have you or your partner ever been denied, suspended or removed from a position of trust for breach of trust or inappropriate actions?
 - iv. Have you or your partner ever been discharged, suspended or asked to resign from employment or from a professional organization?

35. List all instances in the last five years where you, your partner or dependent(s) have given a guarantee, co-signed or otherwise insured payment of a loan, debt or other financial obligation.

(*)	Nature of Obligation (Personal Guarantee, Etc.)	Primary Debtor	Date Obligation Made	Original Balance	Current Balance	Status of Debt

36. List all assets or liabilities currently held in trust by you, your partner or dependent(s).

(*)	Description of Trust	Location of Trust	Names of Other(s) With Interest in Trust

37. List all individuals or entities that currently hold, manage or control in trust, any assets or liabilities on behalf of you, your partner or dependents.

(*)	Name of Person	Location of Trust	Names of Other(s) With Interest in Trust

		, , ,			
(*)	Date	Amount of Exchange	Location Where Exchange Made	Reason for Exchange	Did you fill out or file any Governmental Reporting Document?

38. List all instances in the last five years where you, your partner or dependents exchanged currency of \$10,000 or more in any calendar year.

39. List all instances in the last five years where you, your partner or dependents have filed any insurance, civil, or other similar claims exceeding \$10,000.

(*)	Date of Claim	Nature of Claim	Name and Address of Insurance Carrier or Equivalent	Disposition

40. List all instances in the last five years where you, your partner or dependents have given or received any gift exceeding \$10,000, monetary or otherwise.

(*)	Date	Given or Received	Name of Donor/Donee	Description of Gift	Approximate Value

- 41. If you answer yes to any of the following, include a narrative explaining your answer (include as an attachment):
 - i. In the last ten years has any level of government filed a lien against or seized any of your or your partner's assets?
 - ii. In the last ten years have you or your partner been a defendant in any collection or debt matters?

No Yes

iii. In the last ten years have you or your partner had your wages or assets garnisheed?

No Yes

iv. In the last ten years have you or your partner applied for any financial monitoring or consumer proposal?

No Yes

- v. Have you or your partner ever declared bankruptcy?
 - No Yes
- vi. Have any corporations in which you, your partner or dependents held a 10% or greater ownership interest, or served as an officer or director ever declared bankruptcy or insolvency or been placed in receivership?

No Yes

42. Attach all completed **personal** income tax and GST returns for you and your partner. Also include returns for those dependents whose income exceeds \$10,000. Include all T slips, supplementary schedules, Notices of Assessment/Reassessment.

First disclosure: attach returns for the last five years for each individual.

Subsequent disclosure: attach the last filed return and any not provided with a previous disclosure. Attachment #_____

43. Attach all **corporate** tax returns, Notices of Assessment/Reassessment and GST returns, for all corporations that you, your partner or dependents have a controlling interest in.

First disclosure: attach corporate returns for the last five years for each individual.

Subsequent disclosure: attach the last filed returns and any not provided with a previous disclosure. Attachment #_____

44. Attach all corporate financial statements including all notes to financial statements for all corporations that you, your partner or dependents have a controlling interest in.

First disclosure: attach financial statements for the last five years.

Subsequent disclosure: attach the last financial statements and any not provided with a previous disclosure. Attachment #_____

45. STATEMENT OF ANNUAL INCOME

List all sources of annual income including non-taxable sources (gifts, etc.) for you, your partner and dependents for the last five years.

First disclosure: starting with the most **current** year, plus the last five years.

Subsequent disclosure: provide the most **current** year to date annual income and income for years not provided on a previous disclosure.

i. You:

Source of Income	Current Year to Date	Year #1	Year #2	Year #3	Year #4	Year #5
	(Estimate)	20	20	20	20	20
Employment Income	\$					
Pension & Annuities	\$					
Dividends	\$					
Other (specify)	\$					
Other (specify)	\$					
Other (specify)	\$					
TOTAL INCOME	\$					

ii. Your Partner:

Source of Income	Current Year to Date	Year #1	Year #2	Year #3	Year #4	Year #5
	(Estimate)	20	20	20	20	20
Employment Income	\$					
Pension & Annuities	\$					
Dividends	\$					
Other (specify)	\$					
Other (specify)	\$					
Other (specify)	\$					
TOTAL INCOME	\$					

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iii. Dependent #1 – Name: ______

Source of Income	Current Year to	Year #1	Year #2	Year #3	Year #4	Year #5
	Date					
	(Estimate)	20	20	20	20	20
Employment Income	\$					
Pension & Annuities	\$					
Dividends	\$					
Other (specify)	\$					
Other (specify)	\$					
Other (specify)	\$					
TOTAL INCOME	\$					

iv. Dependent #2 – Name:

Source of Income	Current Year to Date	Year #1	Year #2	Year #3	Year #4	Year #5
	(Estimate)	20	20	20	20	20
Employment Income	\$					
Pension & Annuities	\$					
Dividends	\$					
Other (specify)	\$					
Other (specify)	\$					
Other (specify)	\$					
TOTAL INCOME	\$					

(B) Amount Outstanding

46. STATEMENT OF ASSETS AND LIABILITIES

Prior to completing this Statement of Assets and Liabilities:

- i. Complete Schedules "A" to "M" (found in the following pages).
- ii. Ensure totals from the Schedules are then entered onto the appropriate line below.
- iii. Identify information provided for partner and dependent(s) with an asterisk (*) on the appropriate line.
- **iV.** Ensure all supporting documents are attached.

	ASSETS					LIABILITIES	
	Asset	Sch. #	(A) Current Value			Liability	Sch. #
1	Cash On Hand			10	I	Mortgages and Rent	I
1a	Cash In Financial Institutions	А		11		Loans and Lines of Credit	J
2	Loans, Notes and Other Receivables	В		12		Credit Cards	К
3	GICs, Term Deposits and Mutual Funds	с		13		Taxes Payable	L
4	Stocks and Other Marketable Investments	D		14		Other Liabilities	М
5	Real Estate Interests	E				TOTAL LI	ABILITIES
6	Cash Value Pension/Retirement Funds	F					
7	Vehicles	G					
8	Other Assets	н				Total Assets (Column A) Less Total Liabilities (Column B)
9	Furniture/Clothing (Reasonable Estimate)						-
	TOTA	L ASSETS				Contingent (if a	Liabilities pplicable)

47. SCHEDULE A: CASH IN FINANCIAL INSTITUTIONS

List all bank accounts (foreign and domestic) currently held by you, your partner and dependents.

(*)	Name Appearing on Account	Transit Number and Account Number	Type of Account	Balance
			Total Current Balance	

(Enter Amount on Line 1A)

48. SCHEDULE B: LOANS, NOTES AND OTHER RECEIVABLES

List all loans, notes and other receivables **owed to you**, your partner and dependents.

(*)	Name of Debtor	Interest Rate(%)	Original Loan Amount	Date of Loan	Due Date	Nature of Security	Balance
						Total Current Balance	

(Enter Amount on Line 2)

49. SCHEDULE C: GICS, TERM DEPOSITS AND MUTUAL FUNDS

List all GICs, Term Deposits and Mutual Funds currently held by you, your partner and dependents. Attach current account statement(s).

(*)	Date Acquired	Name of Fund	Name of Institution	Cost at Acquisition	Current Market Value
				Total Current Market Value (Enter Amount on Line 3)	

50. SCHEDULE D: STOCKS AND OTHER MARKETABLE INVESTMENTS

List all stocks and other marketable investments (i.e. securities, shares, ETFs, bonds, commodity accounts, stock options, etc.), currently held by you, your partner and dependents. Attach current account statement(s).

(*)	Publicly	Number of Securities/	Date	Tuno of Invoctment	Name of Institution	Cost at Time	e of Acquisition	Current Market
(*)	Traded (Y/N)	Contracts Held	Acquired	Type of Investment	Name of institution	Actual Cost	Market Value (if not the same as cost)	Value
			L			Tota	l Current Market Value	

(Enter Amount on Line 4)

51. SCHEDULE E: REAL ESTATE INTERESTS

List all real estate you, your partner or dependents own or have owned in the past 5 years.

Provide copies of all purchase and sales documents (unless previously provided).

(*)	Legal Land Description	Civic Address	Type of Property (Commercial/ Residential)	Date Acquired	Purchase Price of % Owned	Down Payment	Individuals or Entities Sharing Interest (Include % of Ownership for Each)	Annual Property Tax	Monthly Rental Income	Estimated Market Value of % Owned

Total Current Market Value (Enter Amount on Line 5)

52. SCHEDULE F: CASH VALUE – PENSION/RETIREMENT FUNDS

List the **current** cash value of all retirement and pension funds held by you, your partner and dependents. Attach current account statement(s).

(*)	Type of pension or retirement fund and Account Number (if any)	Employer/Institution	Cumulative Employee Contribution	Cumulative Employer Contribution	Date of cash Value	Current Cash Value
					Total Cash Value	

(Enter Amount on Line 6)

53. SCHEDULE G: VEHICLES

List all vehicles that are **currently** owned or leased by you, your partner and dependents (i.e. cars, trucks, airplanes, boats, recreation vehicles, etc.).

Provide copies of all purchase and sales documents (unless previously provided).

	Type of Vehicle Year, Make and Model	Owned or	Date of Purchase/Lease	Purchase Price	Down Payment		ased	Current Market
(*)	fear, Make and Model	Leased	Purchase/Lease			Payment	Term	Value
<u> </u>								

Total Current Market Value

(Enter Amount on Line 7)

54. SCHEDULE H: OTHER ASSETS

List all other assets **currently** held by you, your partner and your dependents.

- Business interests such as joint ventures, partnerships, sole proprietorships, corporations and LLCs.
- Cash surrender value of whole life insurance.
- Other assets (i.e. art/coin/stamp collections, tools, jewellery, antiques, etc.).

(*)	Nature of Asset	Percentage of Ownership	Date of Acquisition	Cost at Acquisition	Current Market Value

Total Current Market Value

(Enter Amount on Line 8)

55. SCHEDULE I: MORTGAGES AND RENT

List all mortgages and rental payments for wh	ich you, your partner and de	ependents are obligated.	Attach current mortgage statement(s).
	, , , ,	1 0	00 ()

(*)	Name of Lender, Landlord	Date Incurred	Original Amount of Liability	Description/Address of Real Estate	Term of Mortgage	Interest Rate (%)	Monthly Payment	Current Mortgage Balance
	Total Current Balance							

Total Current Balance (Enter Amount on Line 10)

56. SCHEDULE J: LOANS, LIENS AND LINES OF CREDIT

List all loans, liens and lines of credit for which you, your partner and dependents are obligated. Attach current account statement(s).

(*)	Name of Creditor	Account Number	Date Opened/ Incurred	Term	Interest Rate (%)	Nature of Account	Original Amount of Liability	Security Pledged	Monthly Payment	Current Balance

Total Current Balance (Enter Amount on Line 11)

57. SCHEDULE K: CREDIT CARDS

List all credit cards for which you, your partner and dependents are obligated.

(*)	Name of Creditor	Interest Rate (%)	Paid in Full Monthly (Y/N)	Monthly Payment	Current Balance

Total Current Balance (Enter Amount on Line 12)

58. SCHEDULE L: TAXES PAYABLE

(*)	Taxing Authority	Nature of Tax	Date of Original Obligation	Amount of Original Obligation	Payment Terms	Current Balance

List all taxes payable, including real estate and income tax, for which you, your partner and your dependents are **currently** obligated.

Total Current Balance (Enter Amount on Line 13)

59. SCHEDULE N: OTHER LIABILITIES

List all other liabilities for which you, you	ur partner o	or your dependents are obligated (inc	lude liabilities t	o family members	, friends, etc.).

(*)	Name of Creditor	Interest Rate (%)	Description of Liability, Type of Obligation and Nature of Security	Due Date	Payment	Original Amount	Current Balance
	Total Current Palance						

Total Current Balance (Enter Amount on Line 14)

STATUTORY DECLARATION

(PRINT full LEGAL name)

of the city of ______ in the province/state of ______,

do solemnly declare that

١,

- 1. I personally supplied and/or verified all information contained in this personal applicant disclosure ("Disclosure"), and I have personally initialled and dated each page of this Disclosure.
- 2. I understand and read the English language or I have had an interpreter read, explain and record the answer to each and every question on this Disclosure.
- **3.** The information provided on this Disclosure is true, accurate and complete to the best of my knowledge, and all requested documentation has been provided.
- **4.** Any document accompanying this Disclosure that is not an original document is an accurate copy of the original document.
- 5. I executed the disclosure with the knowledge that it is an official document and that failure to disclose or provide complete and accurate information on any portion of it may result in the applicant being rejected for licence or registration by the AGLC. I am further aware that later discovery of an omission or misrepresentation may be grounds for any finding of suitability to be suspended or revoked.

I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

Declared before me in the city of ______ in the province/state of ______

this ______ day of ______, 20_____.

Your Signature

Notary Public, Justice of the Peace, Commissioner for Oaths, or Other Person Authorized to Take Declarations

My appointment expires: _____

Initial _____ Date: _

The Alberta Gaming, Liquor and Cannabis Commission (the "AGLC") is required to conduct background checks and collect information to determine the eligibility of applicants pursuant to the *Gaming, Liquor and Cannabis Act*, R.S.A. 2000, c.G-1. The AGLC is required under the *Freedom of Information and Protection of Privacy Act* to protect the confidentiality of personal and corporate information. The information is strictly for the use of the AGLC and is intended to be used for the purpose for which it was collected.

CONSENT WAIVER

Your Name: _____

- 1. I authorize the AGLC to verify all information provided by me in the Personal Applicant Disclosure (the Disclosure) or other information identified during the course of the background investigation. The information is strictly for the use of the AGLC and is intended to be used for the purpose of a background investigation pursuant to Section 9 and 9.1 of the GLCR.
- 2. I authorize the following entities to release to the AGLC any documents, records or correspondence that are or may be, relevant to determining whether I may be a detriment to the integrity or lawful conduct of gaming activities:
 - i) Canada Revenue Agency, or the United States Internal Revenue Service, or other equivalent foreign taxing authority;
 - ii) Financial institutions, including banks, credit unions, trust companies, investment dealers or brokerage houses;
 - iii) Credit reporting agencies;
 - iv) Law enforcement agencies, police services or sheriff's office (release of criminal record);
 - v) Gaming commissions, or other regulatory, licensing or administrative bodies; or
 - vi) Federal, provincial, state, or municipal government.
- **3.** I authorize the AGLC to share with the entities listed above the information I have provided or other information identified during the course of the background investigation.
- 4. I authorize the AGLC to conduct ongoing investigations, including but not limited to checks for outstanding criminal charges, criminal records, police intelligence and credit bureau.
- 5. This authorization shall be in effect for the duration of the registration, licence or approval granted by the AGLC.
- 6. I acknowledge that additional consent may be required for the collection of information from the entities listed above and agree to cooperate and provide any further consent as may be required throughout the course of the background investigation.
- 7. I acknowledge that I shall not be entitled to make any claim against a party to whom this consent form is presented in respect of the release of information or documents in good faith to the AGLC.
- 8. I authorize a reproduction of this request to be treated as the original.

Dated this ______ day of ______, 20_____,

Your Signature

The Gaming, Liquor and Cannabis Regulation states in part

- A. "Background check" means an inquiry or investigation conducted by the Commission to enable the Commission to determine the eligibility of an applicant to be registered or to continue to be registered, and includes but is not limited to an inquiry or investigation relating to the honesty and integrity, financial history and competence of the applicant or the registrant, or any person with connections to the applicant or registrant.
- **B.** The Commission may conduct any background check that it considers necessary or appropriate.

C. The board may refuse to register an applicant

- 1. If the applicant or any of the applicant's associates fails to pass a criminal record check. A person does not pass a record check if the person
 - i. Has within the five (5) years prior to the submission of an application, been charged with or convicted of an offence under
 - a) the Criminal Code (Canada),
 - b) the Excise Act (Canada),
 - c) the Food and Drugs Act (Canada),
 - d) the Controlled Drugs and Substances Act (Canada), or
 - e) a similar offence under a foreign Act or Regulation.
 - ii. Has at any time been charged with or convicted of an offence as described above if in the board's opinion the offence is sufficiently serious that it may detract from the integrity with which gaming activities or provincial lotteries are to be conducted in Alberta or may be detrimental to the orderly or lawful conduct of activities authorized by a liquor licence or a registration relating to liquor.
 - iii. Has within the five (5) years prior to the submission of the application been serving a term of imprisonment of three (3) years or more.
- If the board is satisfied that the applicant or any of the applicant's associates has within the five (5) years prior to the submission of the application contravened
 - i. The *Gaming, Liquor and Cannabis Act* (Alberta) (the "Act") or Regulations under the Act,
 - ii. A predecessor of the Act or Regulations, or

- iii. A condition imposed on a licence or registration issued or made under the Act or a predecessor of the Act.
- **3.** If the board is satisfied that the applicant or any of the applicant's associates
 - Is a person who has not acted or may not act in accordance with the law, with honesty and integrity or in the public interest, having regard to the past conduct of the person,
 - Would be a detriment to the integrity or lawful conduct of gaming activities or provincial lotteries,
 - iii. Is a person whose background, reputation and associations may result in adverse publicity for the gaming industry in Alberta.
- D. Enquiries will be made to determine if the applicant or any associated person has ever been charged with or convicted of, or is subject to pending charges for a criminal, regulatory, civil or other statutory offence. The particulars of any offence or claim and the sentence or penalty imposed will be reviewed to determine whether a conviction or charge affects the applicant's eligibility for registration.
- E. Failure to disclose any such involvement will be taken into account when assessing the applicant's eligibility for registration.
- F. Applicants are not required to disclose any investigation, charge or offence if a pardon under the provisions of the *Criminal Records Act* (Canada) or similar legislation is received, or if any records relating to a charge or conviction have been expunged or otherwise officially sealed by a court or government agency.

Terms & Conditions and Operating Guidelines

- A. A registered gaming worker must notify the Commission immediately when charged with or convicted of an offence under
 - 1. the Criminal Code (Canada),
 - 2. the Excise Act (Canada),
 - 3. the Foods and Drugs Act (Canada),
 - 4. the Controlled Drugs and Substances Act,
 - 5. a foreign Act or Regulation that is substantially similar to an offence referred to above,
 - 6. the Gaming, Liquor and Cannabis Act (Alberta), or
 - the Gaming, Liquor and Cannabis Regulation (Alberta).

Application for Registration – Page 1 PROTECTED B WHEN COMPLETED Initial _____ Date: ___

- B. If a registered gaming worker is charged or convicted as described above, the AGLC will review the registration. The review could lead to the board taking disciplinary action including but not limited to suspension or cancellation of the registration.
- **C.** If a registered worker has misled the board, failed to provide information or provided inaccurate information, the board may take disciplinary action including but not limited to suspension or cancellation of the registration.
- D. Any changes in address or surname must be reported immediately to the AGLC either by fax to 780-447-8912, by email to gaming.registrations@aglc.ca, or by telephoning Licensing Registrations at 780-447-8600 or toll-free at 1-800-272-8876.

Notice to Applicants

- A. Registration is subject to all information provided on this application being truthful and complete.
- **B.** The AGLC will review the registration if an individual fails to comply with these Registration Conditions; or is charged with, or convicted of, a criminal offence. This review could lead to the registration being suspended or cancelled.

Re-Applying

Registration can only be renewed by re-applying.

CasinoTrack Registration Cards

Registered gaming workers working at a casino facility on-line with CasinoTrack must have a valid CasinoTrack registration card. The card allows you to enter information in the CasinoTrack system. The following conditions apply

- 1. CasinoTrack cards are <u>not</u> transferable and one card must be on your person at all times when you are working at any licensed casino facility in Alberta. If you do not have a CasinoTrack registration card or fail to renew your gaming worker registration you will not be authorized to enter the CasinoTrack system and will not be allowed to work.
- 2. Cards may be used at all licensed casino facilities.
- 3. Any lost or stolen card must be reported immediately to the AGLC at 1-800-272-8876 or Fax 780-447-8912. When calling, refer to your reference number and your registration number located on the card still in your possession.
- 4. Cards will be replaced at a cost of \$25 in the event of damage or loss.
- 5. Cards may be hole-punched in order to attach to your current name tag. When punching the cards, the bar code area must not be damaged.
- 6. These cards coincide with registration expiry dates, and will be updated upon receiving registration information required by the AGLC. Cards will not be replaced when renewing a registration.
- 7. Failure to renew registration with the AGLC will automatically void the CasinoTrack registration card.
- CasinoTrack Cards are the property of the AGLC, and are 8. to be retained by the registrant and not by the Casino Facility.

I certify that I have read and understand the conditions of registration as outlined above.

Further, I understand that any false statement or incomplete information provided may result in my registration being refused.

Dated this _____ day of _____, 20____,

Your signature

SPECIAL REQUIREMENTS – ADVISOR

1.	Personal	Information:

Last	First	Middle	Registration Number

2. Attach a copy of your Birth Certificate, Canadian Passport, Indian Status Card, Canadian Citizenship or Immigration Documents.

	tach a colour passport photograph:	
Í.	You must sign the back.	ATTACH COLOUR PHOTO
ii	Date that the photo was taken.	HERE MUST BE ATTACHED
	(must be within the last three months):	FOR EASY REMOVAL

4. I hereby authorize the Alberta Gaming, Liquor and Cannabis Commission to release the following contact information (Check all that apply) Email Home Phone Business Phone

- 5. Please provide the following contact information to ensure Advisor Listing is up to date:

Home Telephone Number	Work Telephone Number	E-mail Addresses

Name

Attachment #:

SPECIAL REQUIREMENTS - REGISTRATION APPLICATION FOR GAMING WORKER

Casinos must identify a Casino Manager and a Director/Manager of Security; RECs must identify a Director/Manager of Security. These have been designated as key employee positions that must be registered with the AGLC.

The AGLC may designate other registered gaming workers as key employees, including but not limited to any Head Games Manager and a Casino or REC Slot Manager.

Registration expiry dates for these key employees will coincide with that of the facility licensee.

Prior to a registration being issued to a designated key employee, individuals must complete this disclosure application which replaces the previous four-page "Registration Application for Gaming Worker – Casino, Bingo and Racing Entertainment Centre".

A due diligence investigation will be conducted on the registered gaming worker and any persons associated to the registered gaming worker, including but not limited to their partner.

Should the registered gaming worker leave the employ of the facility licensee, the AGLC must be notified immediately.

1. **REGISTERED GAMING WORKERS DESIGNATED AS KEY EMPLOYEES –** Complete the following:

Last	First	Middle	Registration Number

2. Attach a copy of your Birth Certificate, Canadian Passport, Indian Status Card, Canadian Citizenship or Immigration Documents.

Attachment #:_____

3.	Attach a colour passport photograph:			
	 You must sign the back. 		ATTACH COLOUR F	ото
	ii. Date that the photo was taken.		HERE MUST BE AT	TACHED
	(Must be within the last three months):		FOR EASY REMOV	AL
4.	Registered gaming worker positions applied for	:		
	Alternate General Manager (Charity)	General Manager (Charity)	Surveillance Manager	Casino Slot Manager
	Casino-Director or Manager of Security	Games Manager (Head)	Casino Manager	
	REC-Director or Manager of Security	REC Slot Manager	Other (specify)	

i.	Games Manager (Head)		
	, , ,	ered dealer; with experience at the pit boss and pit supervisor levels; and pass tact the AGLC office to arrange for testing. A completed disclosure package losure will be returned unopened.	
	Within these hours, the registrant must oversee a minimum of 4	r period (28 of these hours must be in the last year) to remain registered. opening procedures and a minimum of 4 closing procedures. If not you will be s, licensee's name, and number of games of the last four casino events worked.	
ii. For new or expired gaming workers, the appropriate individual (listed) must complete and sign the certification			
	 Casino Manager: Casino facility licensee director or shareholder. Casino Director or Manager of Security: Casino facility director o shareholder. Casino Slot Manager: Casino facility licensee games manager. 	 REC Director or Manager of Security: REC facility licensee general manager. REC Slot Manager: REC facility licensee gaming terminal manager. Casino Surveillance Manager: Casino facility director or shareholder. 	
	I CERTIFY, that in my opinion	(Applicant name) has the knowledge and skills necessary to perform	
	the duties of(pos	ition applied for) as outlined in Terms & Conditions and Operating Guidelines.	
	Signature	Position held	
	Signatory Full PRINTED name	Date	
	Facility Name	Telephone	

SPECIAL REQUIREMENTS – RAFFLE TICKET MANAGER

1. Personal Information:

Last	First	Middle	

2. Attach a copy of your Birth Certificate, Canadian Passport, Indian Status Card, Canadian Citizenship or Immigration Documents.

Attachment #:_____

3. Provide a list of all licensed charities you have provided your services to, directly or indirectly, including both paid and as a volunteer in the last three years. Attach copies of all agreements.

Licensed Charity	Contact Name and Telephone Number

4. Have you loaned monies to, or received monies from, any licensed charity for expenses or for the operation or management of any raffle in the last three years?

Licensed Charity	Contact Name and Telephone Number	Amount Loaned/Received	Reason

5. I hereby authorize the Alberta Gaming, Liquor and Cannabis Commission to release the following contact information (Check all that apply)

,	0; T		5
🗌 Name	🗌 Email	🗌 Home Phone	Business Phone

6. Please provide the following contact information to ensure Raffle Ticket Manager Listing is up to date:

Home Telephone Number	Work Telephone Number	E-mail Addresses